<u>s</u>	child because Yes	nsactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	d" income, tran	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.
₹ []	trusts" need not Yes	s of Official Conduct and certain other "excepted spouse, or dependent child?	e on standards ng you, your s	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
S	NSWER EACH OF THESE QUESTIONS	 A	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	must be answered and ed for each "Yes" responden	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	No No	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
No I	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No C	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
S S	or before the date Yes	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	چ ا	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
S S	receive any reporting Yes ??	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	No [7]	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
8	receive any regating more Yes	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	8 √	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes if yes, complete and attach Schedule I.
		SE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTION
assessed nore than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office: ee Termination Termination	Officer or Employee	Status House of Representatives District: 7 Report Amual (May 15) Amendment
ETTER TER	LEGISLATIVE RESOURCE CENTER 200 MAY 15 PH 2: 25 MULTINOTICE Use lonly). Thirties	Daytime Telephone: (אוז) שייים אוניים אוניי	Daytime	Name: JOHN ASNEY CURRESON
THE D	HAND DELIVERED	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude:	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	s received under the Social Seci	urity Act.
	Source	Туре	Amount
	Keene State	Approved Teaching Fee	\$6,000
Examples:	yland	Legislative Pension	\$9,000
	ble (Oct, 2nd)	Spouse Speech	\$1,000
	ion	Spouse Salary	NA
		i :	
		_	

For payments to charity in lieu of honoraria, use Schedule II.

	Name
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SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

Conduct. O Green shretope for nationillum in the list is included in each interior a limit package.	s illing package.		
Source	Activity	Date	Amount
Association of American Associations, Washington DC	Speech	Feb. 2, 2008	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2008	\$500
		:	

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Asset and/or Income Source **BLOCK A**

of its activities, and its geographic location in od, and (b) any other asset or sources of income which generated more than \$200 in "unearned" instruction booklet. Block A. For additional information, see account and its value at the end of the reporting not self-directed, name the institution holding the reporting threshold. For retirement plans that are land, provide a complete address. Provide full exceeding \$1,000 at the end of the reporting periduction of income with a fair market value Identify (a) each asset held for investment or protraded, state the name of the business, the nature period. For an active business that is not publicly each asset in the account that exceeds the provide the value and income information on not exercised, to select the specific investments) (i.e., plans in which you have the power, even if plans (such as 401(k) plans) that are self directed ticker symbols). For **all IRAs** and other retirement names of stocks and mutual funds (do not use income during the year. For rental property or

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Government retirement programs. less in personal savings accounts; any financial interest in or income derived from U.S. parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, there is rental income); any debt owed to you by Exclude: Your personal residence(s) (unless

dependent child (DC) or is jointly held (JT), in the If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or optional column on the far left

None

\$1 - \$1,000

\$1,001 - \$15,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000

\$5,000,001 - \$25,000,000

\$25,000,001 - \$50,000,000

Over \$50,000,000

DC, SP,

Examples:

Simon & Schuster Mega Corp. Stock

1st Bank of Paducah,

KY Accounts

Indefinite

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Home

X

Value of Asset **BLOCK B**

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

generated income, the value should be year and is included only because it If an asset was sold during the reporting "None."

> Type of Income BLOCK C

BLOCK D

retirement plans or accounts that do Amount of Income

Indicate if the Transaction BLOCK E

X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets <i>including all IRAs</i> , indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
×	None - \$1 - \$200 = \$201 - \$1,000 ≡ \$1,001 - \$2,500 ⋜ \$2,501 - \$5,000 <	For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, <i>including all IRAs</i> , indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.
S (partial)	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed) DC, SP, Asset and/or Income Source かれる 8, CENS RETIREMON ➣ None Œ \$1 ~ \$1,000 O \$1,001 - \$15,000 O \$15,001 - \$50,000 Value of Asset E F G H \$50,001 - \$100,000 Year-End BLOCK B メ \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE **DIVIDENDS** RENT **INTEREST** of Income BLOCK C Type **CAPITAL GAINS EXCEPTED/BLIND TRUST** ANNATA Other Type of Income (Specify) None \$1 - \$200 Amount of Income \$201 - \$1,000 ₹ \$1,001 - \$2,500 X VI VII VIII X BLOCK D \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 \succeq Over \$5,000,000 Page_ Transaction BLOCK E ω°ω`ш) of |

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SCHEDULE IV— TRANSACTIONS

SP, DC, JT amount of the transaction exceeded \$1,000. Include transactions stocks, bonds, commodities futures, or other securities when the dependent child during the reporting year of any real property, sold, please so indicate (i.e., "partial sale"). See example below. or your dependent child, or the purchase or sale of your personal Report any purchase, sale, or exchange by you, your spouse, or residence, unless it is rented out. If only a portion of an asset is transaction. Do not report a transaction between you, your spouse. that resulted in a loss. Provide a brief description of any exchange န Example: Mega Coporation Common Stock (partial sale) Asset of Transaction **PURCHASE** Type SALE **EXCHANGE** Bi-weekly, if applicable (MO/DAY/YR) Quarterly, Monthly, or 10-12-08 Date \$1,001-\$15,000 $\boldsymbol{\varpi}$ \$15,001-\$50,000 റ \$50,001-Amount of Transaction 0 \$100,000 \$100,001-\$250,000 Ш \$250,001-\$500,000 T \$500,001-Ω \$1,000,000

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

	_		
		JT DC,	
Ambrica Enfass	Example: First Bank of Wilmington, Delaware	Creditor	
REMINING CREST	Mortgage on 123 Main St., Dover, Del.	Type of Liability	
8		\$10,001- w \$15,000	П
		\$15,001- \$50,000	Ш
		\$50,001- \$100,000	
	×	\$100,001- \$250,000 m	Amou
		\$250,001- \$500,000 m	unt of
	-	\$500,001- \$1,000,000	Amount of Liability
	1	\$1,000,001- \$5,000,000	₹
	-	\$5,000,001- \$25,000,000 \$25,000,001-	
	lacksquare	\$50,000,000 Over	
		\$50,000,000	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345

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the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a or were paid by you and reimbursed by the sponsor.

spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	City of Dc	(Y/N)	N/A) .	Member included? (Y/N)	Number of days <u>not</u> at sponsor's expense
	Mar. 2	DC—Chicago—DC	z	N	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Y	Y	Y	2 Days

SCHEDULE VIII—POSITIONS

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations): and positions solely of an honorary nature

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	Position	zations), and positions solely of all notionary flature.
	Name of Organization	nicialy nature.

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
	7 ×	